

PD1000064425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

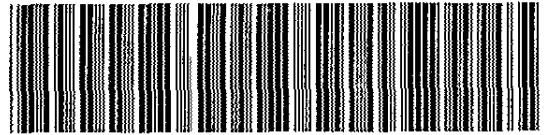
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900030243059

04/07/04--01017--008 **35.00

FILED
04 APR - 7 PM 3:13
SECRETARY OF STATE
CALIFORNIA

Ed Change
T. Lewis 4/7/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: D.R.S. Management 2001, Inc
(Name of corporation)

DOCUMENT NUMBER: PD1000064425

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Sweet
(Name of person)

DR.S. Management 2001, Inc.
(Name of firm/company)

Old address 445 N.W. 210 Street # 205 MIA, FL 33169
(Address)

MIA, FL. 33169
(City/state and zip code)

For further information concerning this matter, please call:

Barbara Sweet at (754) 2350843
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

4/6/04

To whom it may concern
My name is Barbara Sweet
I'm trying to change my
address on my corporation

The address is

3918 S.W. 26th
Hollywood, FL 33023

Sincerely
Barbara Sweet

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: D.R.S. - Management 2001, Inc.
2. The principal office address: P.O. Box 551538

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/28/01 Document number: P01000064425

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Barbara Sweet
445 NW 210 Street #205
Miami, FL 33149

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Barbara Sweet
3918 S.W. 26th new
(P.O. Box or personal mailbox NOT acceptable)
Hollywood, FL 33023

FILED
04 APR -7 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Barbara Sweet
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

4/6/04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314